

# LVAP Certification – Quick Sheet

- 1 LOG-IN CREDENTIALS:** All project directors will receive an email with their agencies ID and passwords. If you are not currently certified, you will need to request an ID and password. The link can be found on our website, under LVAP Certification.  
If you **lose your log-in credentials**, please email Ursula Kelley, [ursula.kelley@cjcc.ga.gov](mailto:ursula.kelley@cjcc.ga.gov) with “LVAP Log-in Credentials” in the subject line.
- 2 ENTER YOUR AGENCY’S INFORMATION** Choose the name of your agency from the list of agencies. Enter in your agency’s mailing address, year established, web address, and phone number. If you are currently certified and your name does not appear on the list of agencies, please STOP the application process and email [Wesley.Acosta@cjcc.ga.gov](mailto:Wesley.Acosta@cjcc.ga.gov).
- 3 SELECT THE COUNTIES SERVED BY YOUR VICTIMS ASSISTANCE AGENCY FOR 2011:** Choose all the counties that your agency provided services for during 2011.
- 4 ENTER YOUR AGENCY’S CHARACTERISTICS:** Enter in the type of agency you are (Choose up to three best descriptions), types of victims you served in 2011 (all that apply), and the types of services you provided (all that apply). You will also enter the name, title, and email address of the person completing the application, in case there are any questions.
- 5 PROFESSIONAL QUALIFICATIONS:** Enter the number of employees that meet each of the criteria (Licensed in Social Work, Completed VAT On-Line, etc). If at least one does employee does not meet this criteria, you will be disqualified. You will need to enter the information of one employee that meets one or more of the criteria. This information includes name, position/title, employment status, amount of time employed.
- 6 SERVICE AREA:** Select your service area. Service area consists of the counties in which you actively perform outreach and have relationships with victim service providers, prosecution, law enforcement and/or the courts. You will be required to enter the number of victims that you served in each of the counties you consider to be part of your service area.
- 7 SELECT COUNTIES YOUR AGENCY WOULD LIKE TO BE CERTIFIED IN.** If you want to be certified in all the counties you serve, you will be prompted to choose the type of MOUs you have. If you only wish to be certified in a selection of the counties, you will be prompted to choose the counties, then the type of MOUs for each of those counties. CJCC will need a copy of ALL MOUs.
- 8 SIGNATURE:** In order to certify the application, you will be required to enter the name of the Agency’s Executive Director and enter your PIN, which is the same number as the password you used to log in to the application.
- 9 CONFIRMATION PAGE:** This page verifies who completed the application and it provides you with a confirmation number. Please print this page for your records. You WILL NOT receive a copy of your completed application. If you would like to go back and screen print certain pages, this would be the time to do so. You MUST click Next in order for your application to be submitted. If you do not see a screen that says “End of Interview. Thank you for your participation.”, you have not submitted your application.
- 10 SUBMIT SUPPORTING DOCUMENTATION:** In order to complete the application process, you will need to submit all necessary supporting documents (MOUs/Certifications) to [CJSI@cjcc.ga.gov](mailto:CJSI@cjcc.ga.gov) no later than 48 hours after the completion of the application. They will only be accepted in PDF form and will need to be named in the following format: “YOURAGENCYNAME-MOU.pdf” or it will not be processed.